

Developmental Disabilities Administration

Quality Assurance Report Fiscal Year 2019

Message from Assistant Secretary Evelyn Perez



Dear Teammates and Stakeholders,

We are pleased to share the Fiscal Year 2019 Annual Quality Assurance Report for the Developmental Disabilities Administration (DDA).

This report describes services we provide and how we measured outcomes in health, safety, and quality of life in FY2019. It was created by using data gathered from a variety of DDA quality assurance systems. This report allows you to review services and supports DDA has provided and how we have performed.

At DDA, we promote continuous quality improvement to meet the needs of those we serve and those that support them everyday. We are proud of the quality of supports provided each day to thousands of individuals by state staff and our contracted providers. Each year offers new challenges and opportunities.

You will find much of DDA's quality assurance work is organized in a manner that helps to ensure [DDA's Guiding Values](#) are an integral part of our service delivery system. The current version of our Guiding Values publication is the result of a committee representing self-advocates, families, residential service providers, county staff, employment providers, advocates, and DDA staff.

DDA remains committed to a partnership with stakeholders and staff in continuing to provide supports and services to the people we serve. The intent of this report is to further our shared goals and open a candid dialogue to focus upon improvements.

Sincerely,

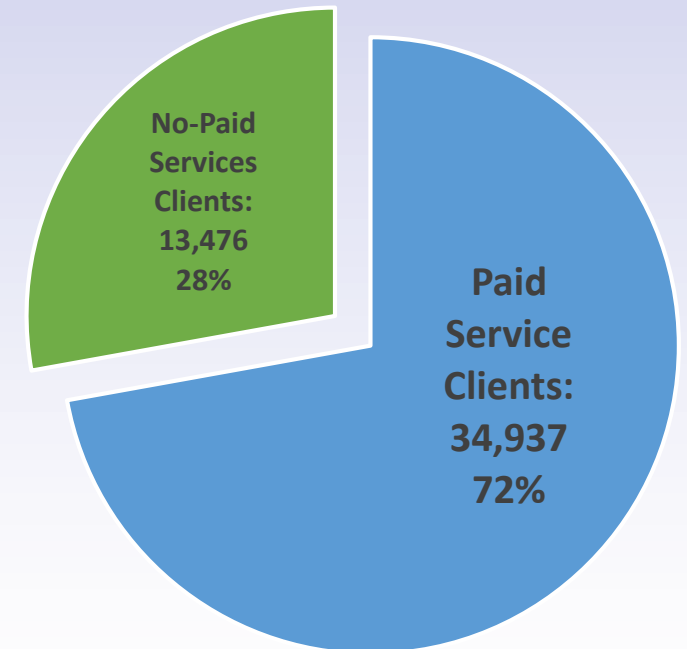
A handwritten signature in cursive script that reads "Evelyn Perez".

Evelyn Perez
Assistant Secretary
Developmental Disabilities Administration

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Total Enrolled Clients 48,413



Data Source: CARE System as of 7/1/2019

DDA Quality Assurance is Mission, Vision, and Value Driven

DDA Mission

Transforming lives

by providing support and fostering partnerships that empower people to live the lives they want

DDA Vision

- **Supporting individuals** to live in, contribute to, and participate in their communities
- **Continually improving supports** to families of both children and adults
- **Individualizing supports** that will empower individuals with developmental disabilities to realize their greatest potential
- **Building support plans based on the needs** and the strengths of the individual and the family
- **Engaging individuals, families,** local service providers, communities, governmental partners and other stakeholders to continually improve our system of supports

DDA Values

- **Respect** gained through positive recognition of the importance of all individuals
- **Person-Centered Planning** to support each person to reach his or her full potential
- **Partnerships** between DDA and clients, families and providers in order to develop and sustain supports and services that are needed and desired
- **Community Participation** by empowering individuals with developmental disabilities to be part of the workforce of contributing members of society

DDA Quality Management System

History and Overview

2000 - Electronic incident reporting system is developed and implemented

2001 - Office of Quality Assurance is established

2002 - Office of Compliance Monitoring is established; Incident Review Committee is convened

2003 - Mortality Review practice implemented

2005 - Standardized compliance monitoring system is developed

2014 - Community Residential Quality Assurance Unit is established

2015 - Quality Management Unit is established to monitor RHCs and PASRR

2016 - Quality Assurance Departments are established at each RHC

2017 - New Incident Report Database is implemented

2019 - Tracking database of DDA clients in hospitals is established

DDA Quality Management System Commitments

Committed to excellence

Taking an active role and prioritize resources to ensure all DDA staff are equipped to support a culture of continuous improvement

Striving to meet and exceed federal and state requirements by embracing best practices

Including individuals with disabilities, their families, and stakeholders in the implementation of our quality management system

DDA Quality Management System Goals

Statewide system to monitor, continuously improve, and ensure quality

Using consistent methods to measure performance

Proactive problem solving

Meeting and exceeding state and federal requirements

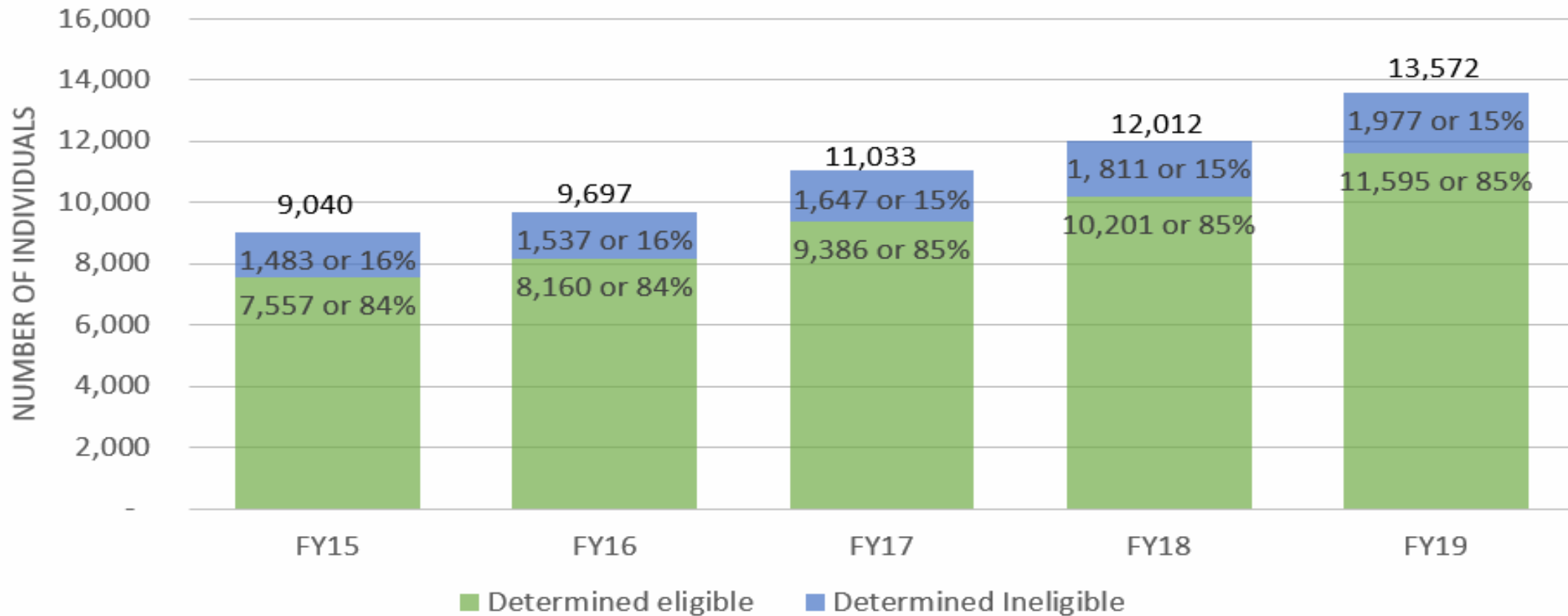
DDA Programs & Services Overview

The next four slides are intended to provide a high-level snapshot of some key program and service areas of special focus or growth during FY 2019 including:

- Eligibility determinations
- Waiver enrollment
- Community residential services, breakdown by type (and)
- State-Operated Living Alternative program, growth and trajectory

DDA Eligibility Determinations

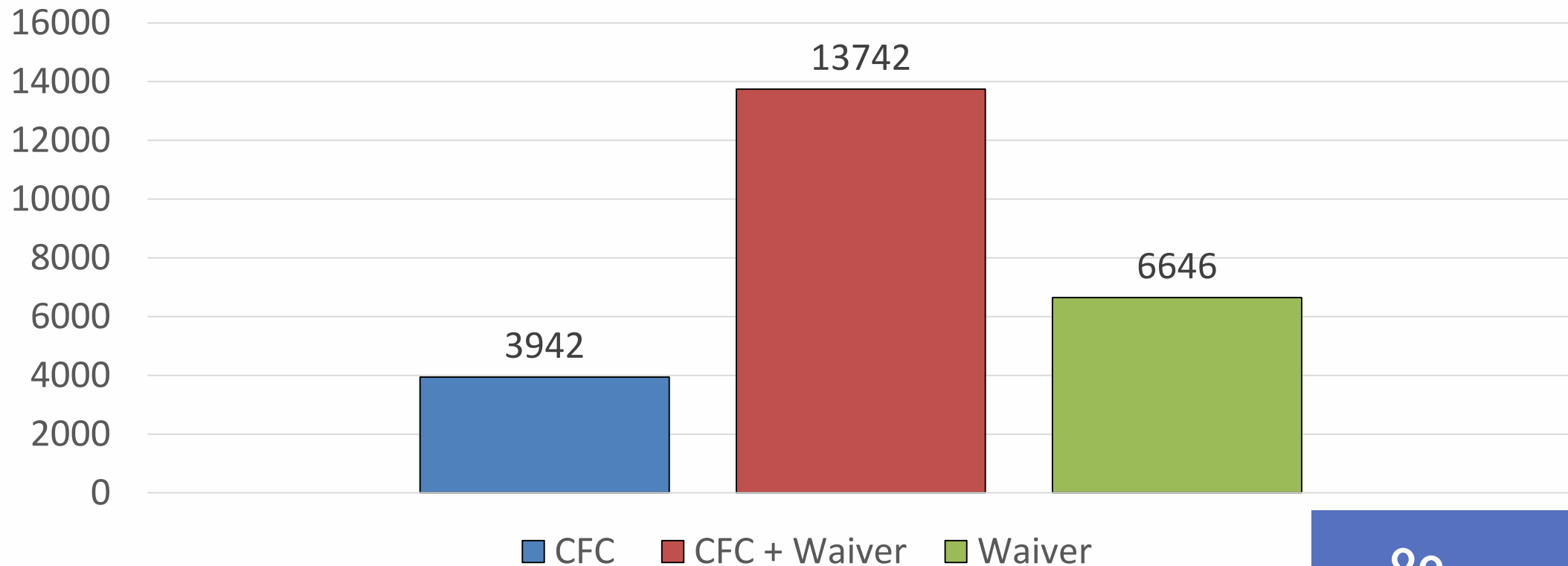
Total eligibility determinations by fiscal year



Data Source: CARE System as of 7/1/2019

Home and Community Based Programs

Number of persons receiving Community First Choice (CFC), CFC and Waiver, and Waiver-only services from DDA in FY 2019



Data Source: CARE System as of 7/1/2019

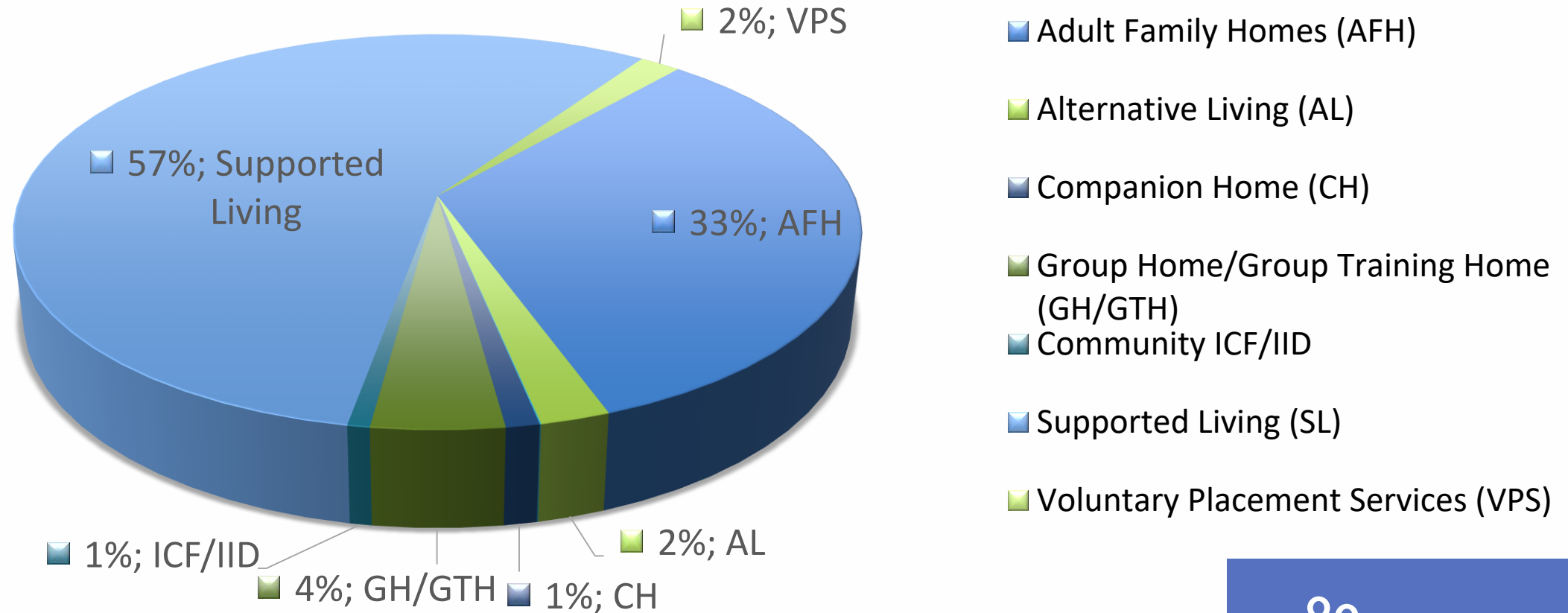


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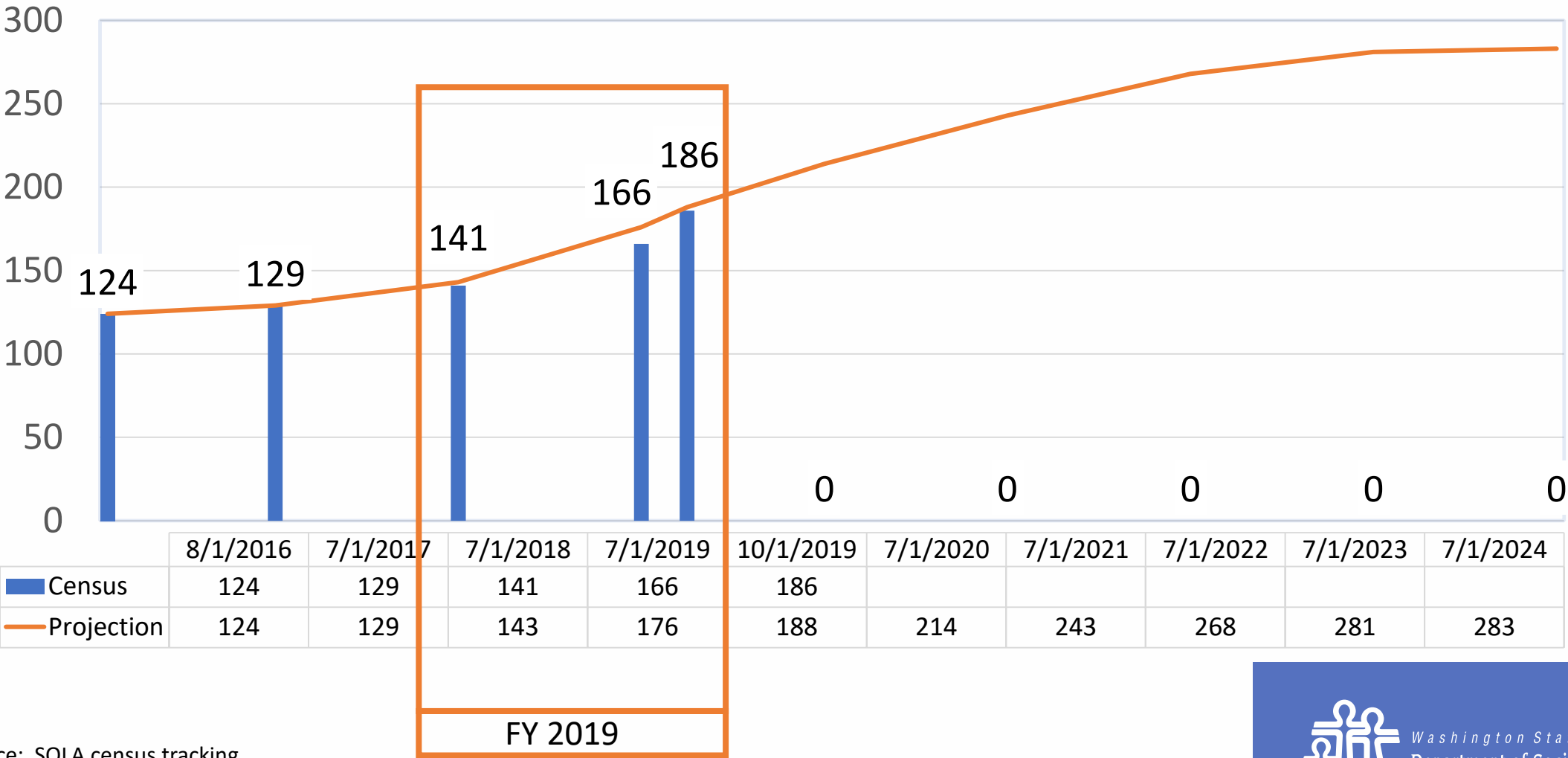
Community Residential Services 2019

Percentage of individuals receiving residential services by residence type



Data Source: CARE System as of 7/1/2019

State-Operated Living Alternative Program



Data Source: SOLA census tracking

DDA Quality Management System

The Developmental Disabilities Administration (DDA) is committed to providing quality programs and services. Responsibility is shared across all programs, services and facilities. Our management system is driven by our mission, vision, and values.

This report is designed to provide a snapshot of the efforts currently in place to ensure that services provided to individuals served by DDA are administered in a way that demonstrates compliance, competency, and quality. Throughout, you will find:

- Information about the activities of the administration aimed at ensuring the quality of those programs and services;
- Reference to [DDA's Guiding Values](#) in the context of quality assurance (QA) objectives; and
- Narratives and data that illustrate some examples of DDA's QA activities

Guiding Values

Inclusion

Status and Contribution

Relationships

Power and Choice

Health and Safety

Competence



Office of Quality Assurance and Communications Overview

The goal of the Office of Quality Assurance and Communications is to enhance the lives of people with developmental disabilities in areas consistent with DDA's Guiding Values: Inclusion, Status and Contribution, Relationships, Power and Choice, Health and Safety, and Competence

Quality Assurance Methods

- **Monitor and manage a statewide incident reporting system** for significant events and systemic issues
- **Oversee formal evaluations** and provide certification for select provider types, including Companion Homes, Alternative Living and Overnight Planned Respite Services
- **Provide routine and targeted training** on mandatory reporting of alleged and suspected abuse/neglect and provided target training
- Conduct, analyze and act upon **client and guardian satisfaction surveys**
- **Review mortality and incident reports** for system improvements
- **Monitor background checks** process and practices
- **Develop and provide targeted provider training**
- Improve and promote **person-centered planning and practices** across settings
- **Conduct Lean activities** and training
- Create performance reports and analysis to **advise leadership decisions**



Outcomes

- Standardized measures reflect continuous quality improvement, rising benchmarks, and highlight best practices statewide
- Customer surveys and advisory groups drive change towards improved and measurable customer satisfaction
- DDA service recipients are safe and free from harm



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Office of Compliance, Monitoring and Training Overview

The Office of Compliance, Monitoring, and Training monitors and trains to ensure DDA policy, procedures and practices are uniform and in compliance with state and federal requirements

Quality Assurance Methods

- **Compliance monitoring**
Develops and implements a quality management system for DDA that includes the complementary functions of quality assurance, monitoring and performance improvement
- **Training**
Ensure DDA staff and contracted service providers receive quality training
- **Assessment**
Ensure DDA provides a standardized assessment process that promotes the consistent and accurate evaluation of client support needs
- **Eligibility**
Ensure requirements and processes for eligibility determination for services are consistently implemented



Outcomes

- Well-trained DDA staff and contracted providers
- Accurate determination of eligibility for DDA
- Compliance with DDA policy, procedure and CMS quality assurances
- Accurate level-of-care assessments



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Objective

Inclusion/Integration
Increase the quality and quantity of time clients spend in the community

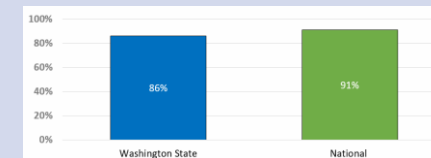
Key Performance Indicators

- Clients receiving Supported Living services spent time in their community at least 4.5 days per week
- SL clients are moving towards 5.0 days/week
- Families and guardians feel their adult children receiving DDA services participate in activities in the community

Performance Charts



- [DDA Strategic Plan 2019-2021: Success Measure 4.1.2](#)



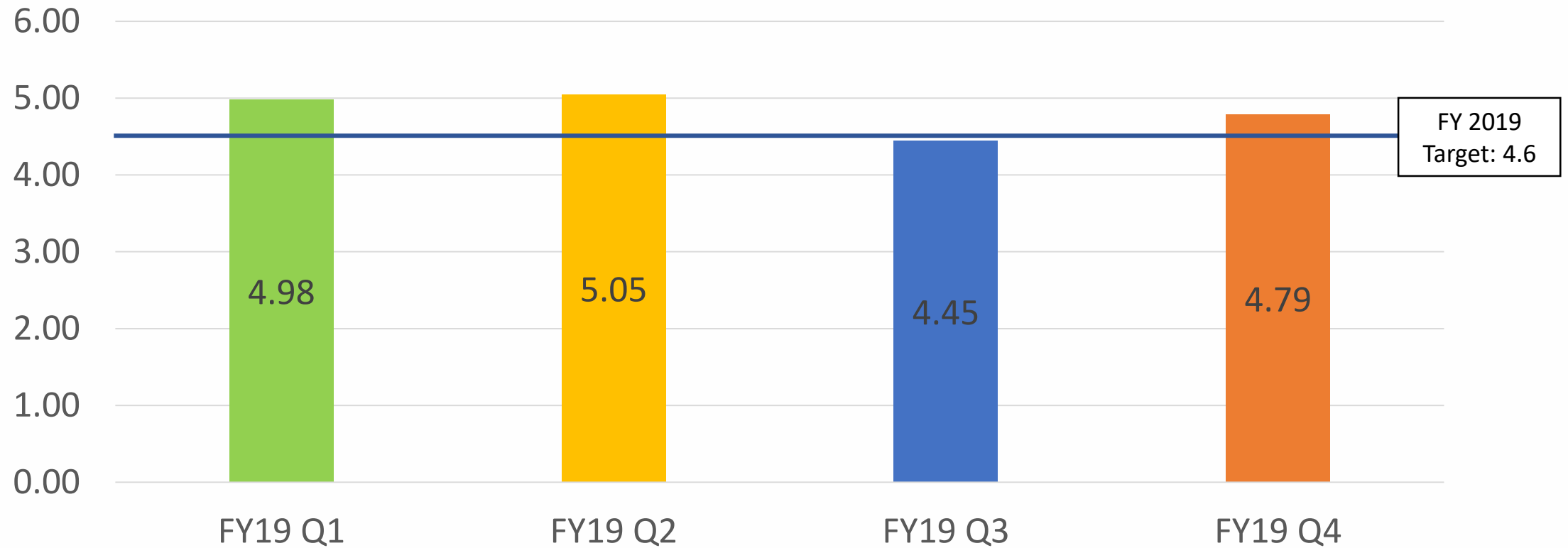
- [Family/Guardian National Core Indicators Survey Results](#)



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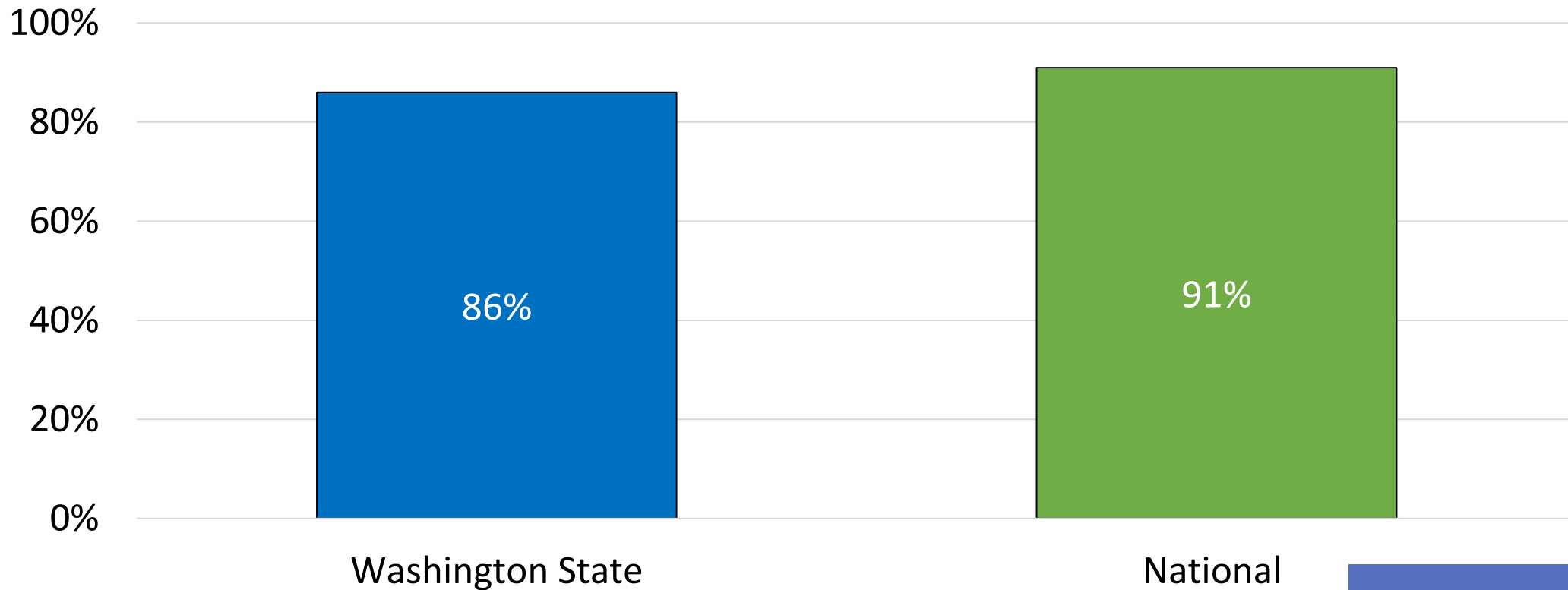
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Days each week Supported Living Clients Spend in their Communities



Data Source: DDA Residential QA Unit,
provider surveys

Percentage of Clients taking part in Activities in the Community



Data Source: 2017-2018 NCI Family Guardian Survey

Objective

Inclusion/Integration
Increase the quality and quantity of time clients spend in the community

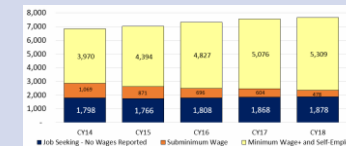
Key Performance Indicators

- Evidence that DDA continues to promote and support competitive employment in the community
- The number of working-age adults employed at minimum wage or better

Performance Charts



- Washington leads the nation in percentage of individuals who receive day services involved with individual Supported Employment



- Number of individuals earning minimum wage or better continues to climb in 2019

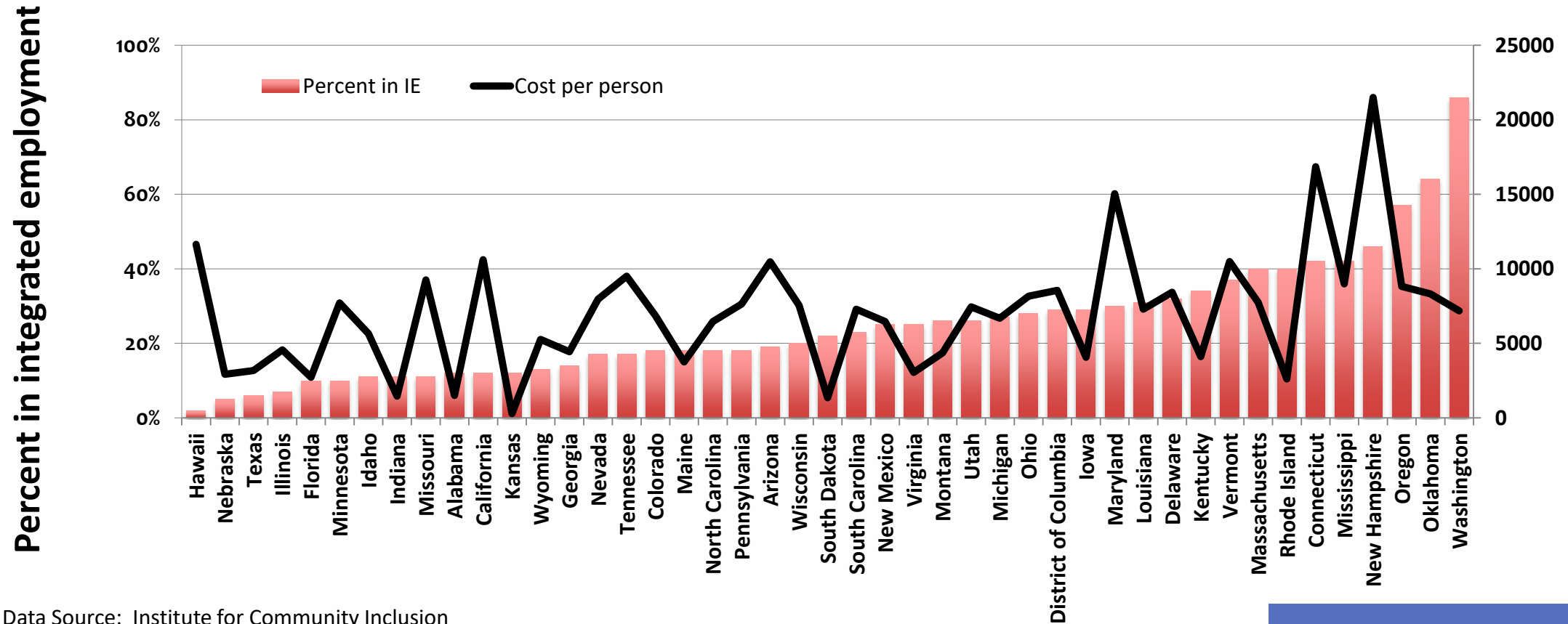


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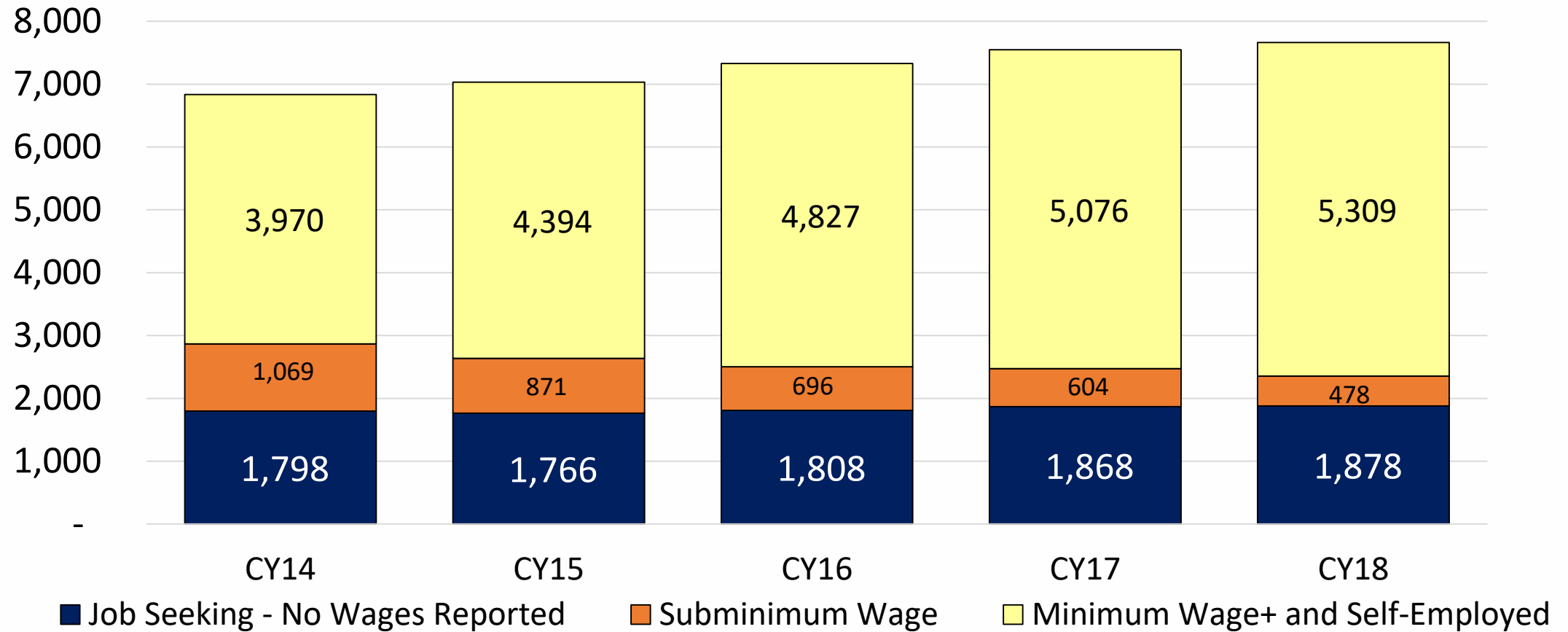
Employment and Day Program FY2019

ICI National Survey of States % in Individual Employment and Cost/Person



Data Source: Institute for Community Inclusion

Employment and Day Program



Data Source: CARE System as of 7/1/2019

Objective

Habilitation and Power and Choice

Increase meaningful person-centered goal-setting and outcomes for clients

Key Performance Indicators

- Person-centered service plan goals are discussed at the Person Centered Service Plan meeting
- Individuals are supported to accomplish meaningful goals
- Community Residential Plan writers receive sufficient training on person-centered instruction and support-plan writing
- Adult family home (AFH) providers are trained and have developed Meaningful Activity Plans and maintained person-centered calendars for more than 170 AFH clients since 2016

Performance Charts

-  [QCC HCBS Monitoring Data](#)
-  [Evidence of Habilitation Goal Progress in Community Residential](#)
-  [Evidence that Supported Living/GTH Plan Writers are properly trained](#)
-  [Adult Family Home Meaningful Activities Pilot Outcomes](#)

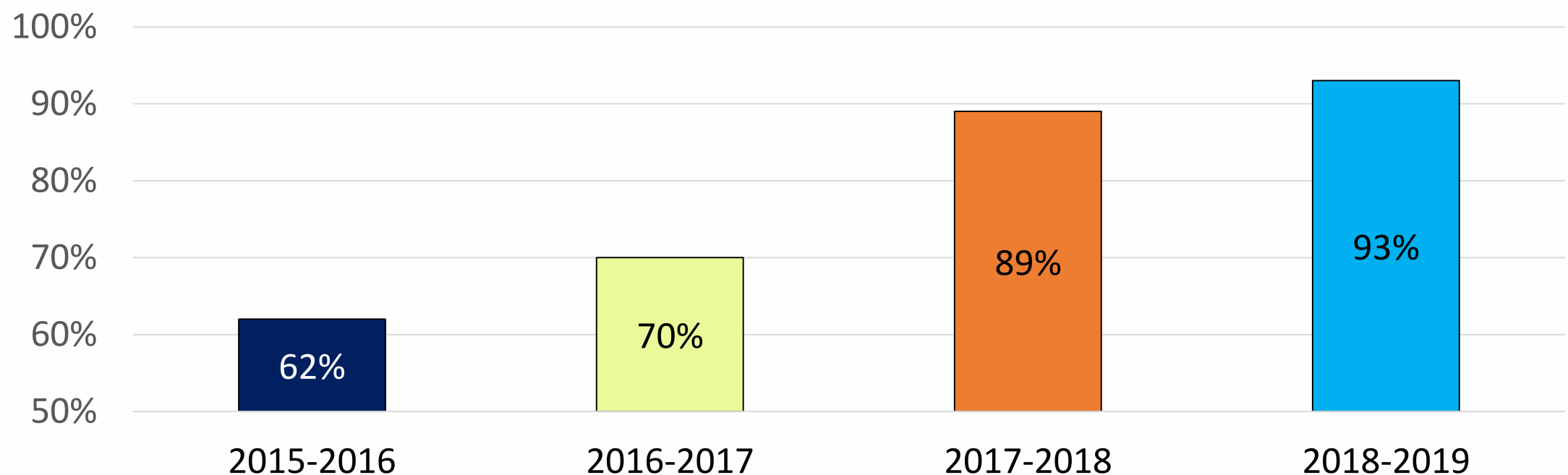


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Person-Centered Service Planning and Client Goals

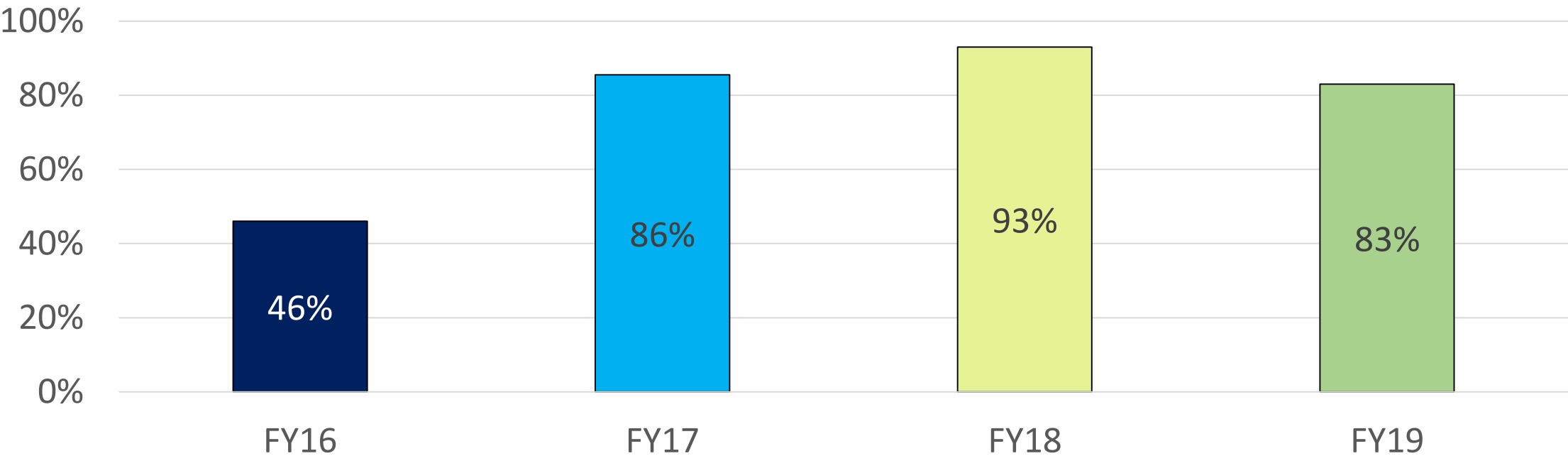
Evidence personal client goals were discussed
and documented in the PCSP



Data Source: QCC HCBS Monitoring data

Evidence of Progress Towards Meeting Habilitation Goal(s)

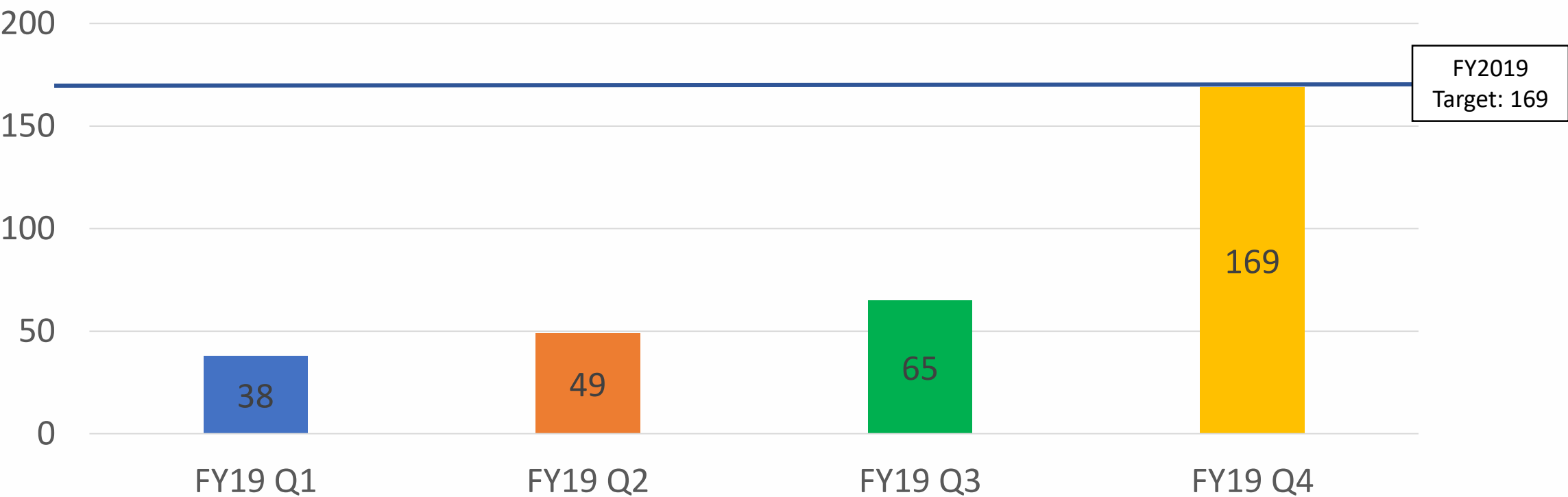
Percentage of sampled Community Residential client's with documented evidence of progress towards achievement of personal goal(s)



Data Source: Residential QA Unit, provider surveys

Number of Supported Living/Group Home Plan Writers

trained by DDA to develop and implement quality individual instruction and support plans (IISPs), including person-centered goal writing

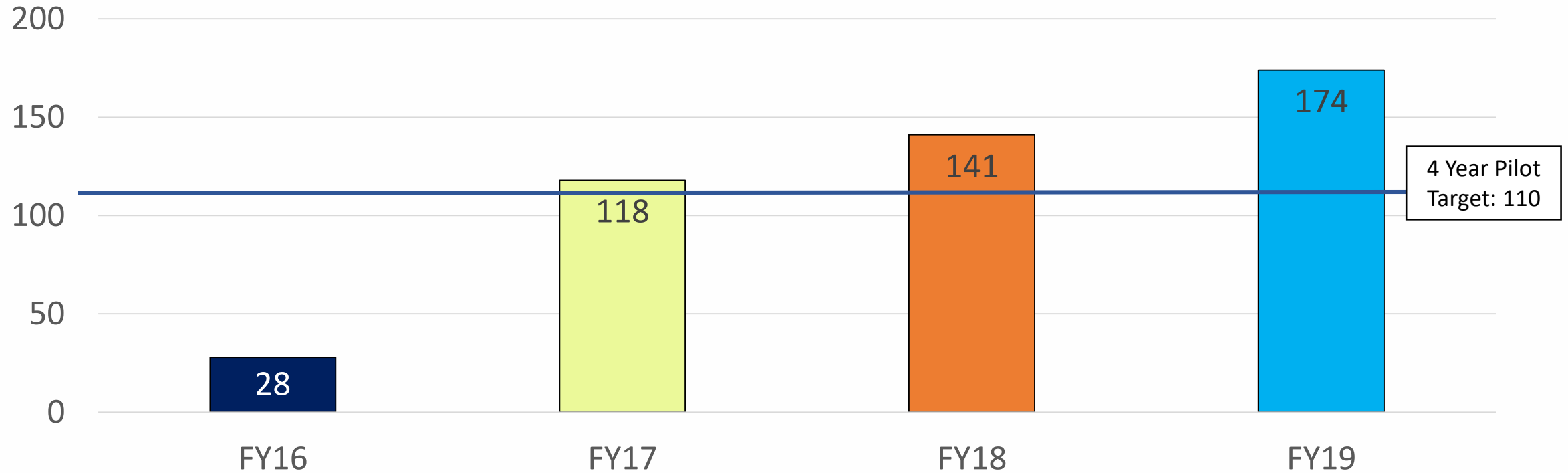


Data Source: Attendee tracking, cumulative

Running Total

Meaningful Activity Plans

Submitted by adult family homes



Data Source: AFH Meaningful Activities
Pilot database

Running Total

Objectives

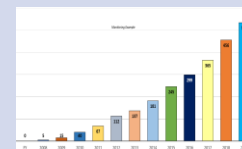
Health and Safety

Ensure individuals transitioning from institutional to community-based service are appropriately supported before, during, and after transition into the community

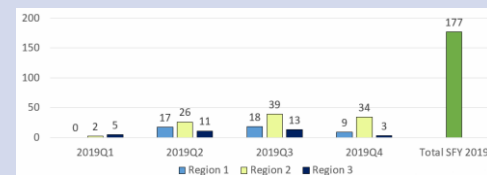
Key Performance Indicators

- Supported 78 individuals to transition into the community
- Support services provided to over 100 individuals transitioned to the community through Roads to Community Living
- Completed and tracked 177 client moves from facilities to community based services

Performance Charts



- [RCL Roads to Community Living 11 year chart](#)
- Link to RCL Transition Videos
 - [Chuck's Story](#)
 - [Greg's Story](#)



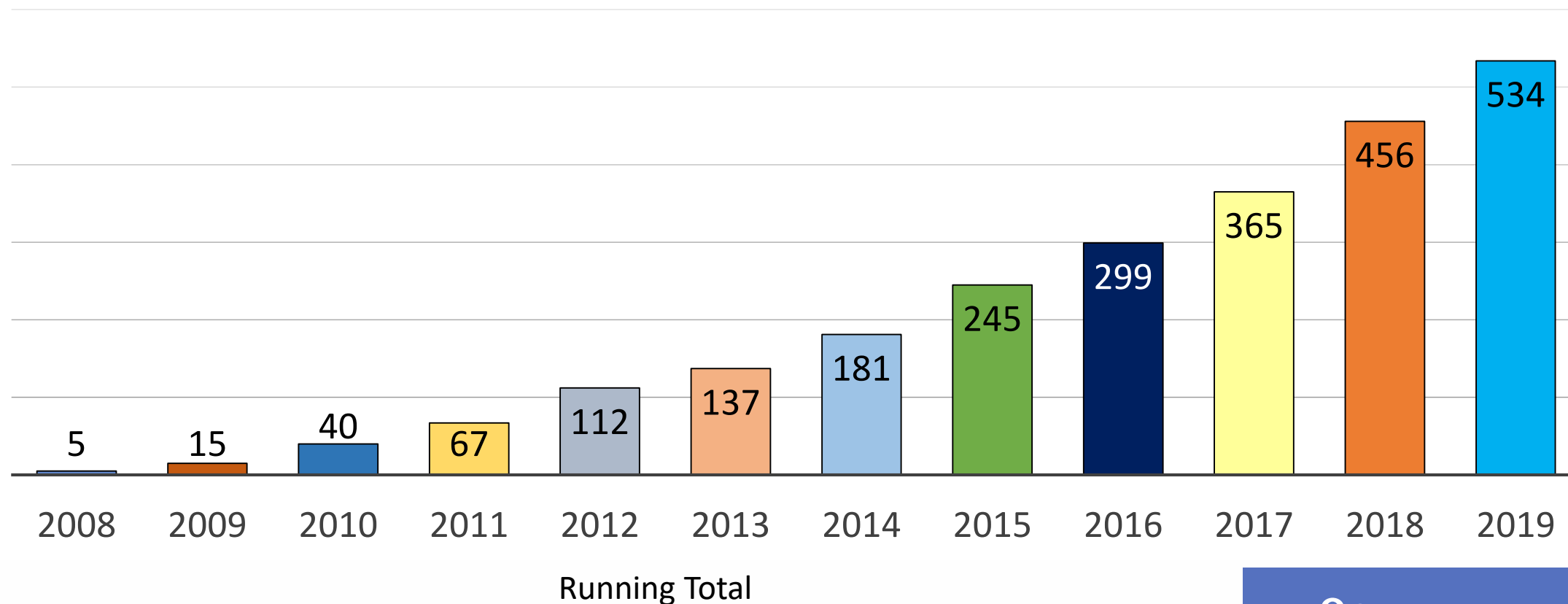
- [Mover's surveys completed for individuals moving from facilities to the community in FY 2019](#)



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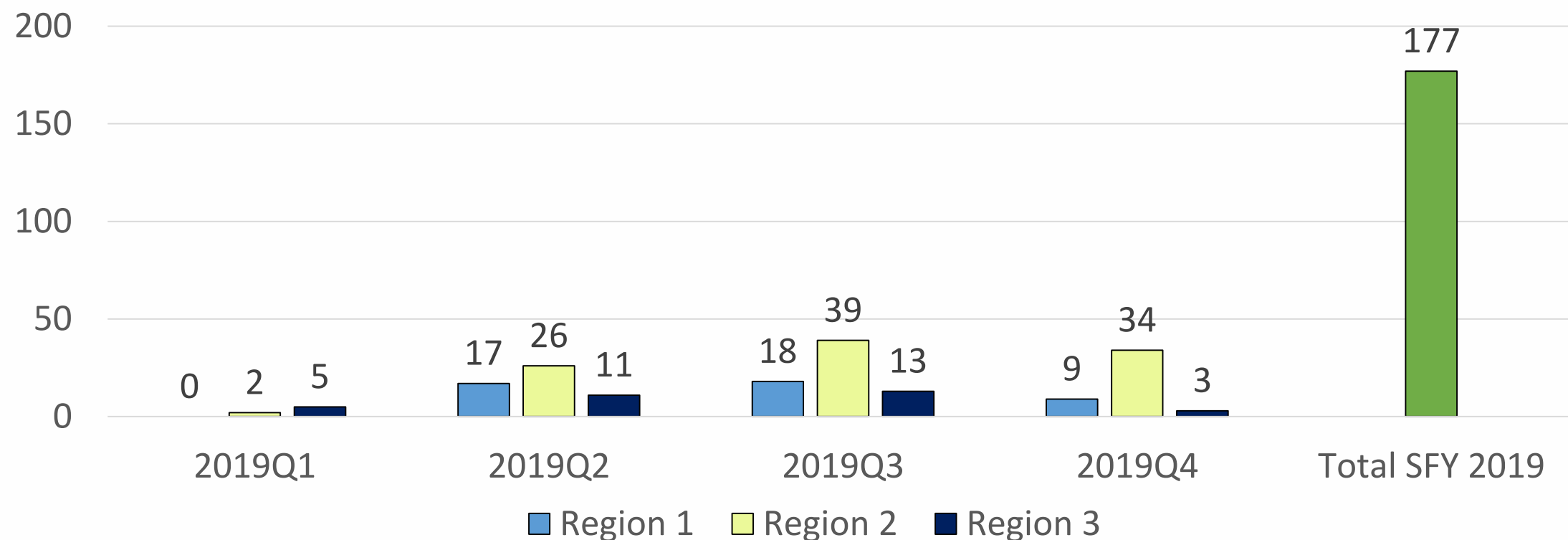
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Roads to Community Living Moves



Data Source: CARE System as of 7/1/2019

Mover's Surveys Completed for Clients Moving from Facilities to Community Programs



Data Source: Mover's Survey database

Objectives

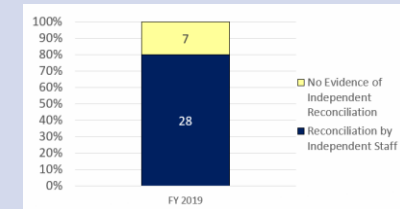
Health and Safety

Help ensure that people in our care are free from abuse, neglect, exploitation, financial exploitation and abandonment

Key Performance Indicators

- Community Residential providers have mechanisms in place to protect client funds

Performance Charts



- [Client Funds DDA QA Audits](#)

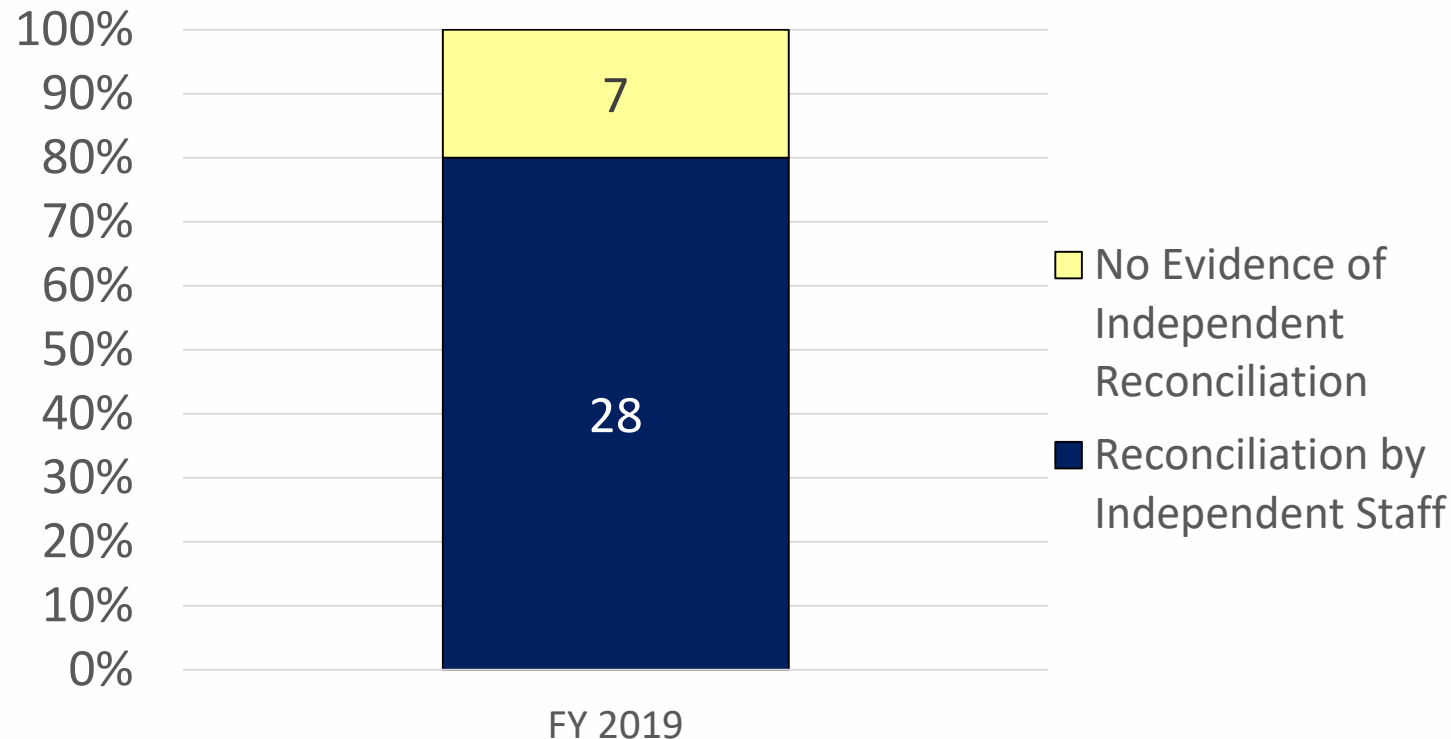


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Client Funds and Individual Instruction and Support (ISS) Hour Reviews

Supported Living/Group Home/Group Training Home providers



80% of providers had systems in place to ensure client funds verification/reconciliation is done by an independent staff, not involved with client financial transactions

Data Source: Audit Tracking 7/1/2018-6/30/2019

Objectives

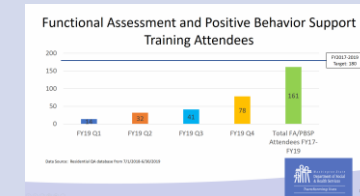
Health and Safety

Providers are equipped to develop and implement plans necessary to support individuals receiving residential services, including those presenting with challenging support issues

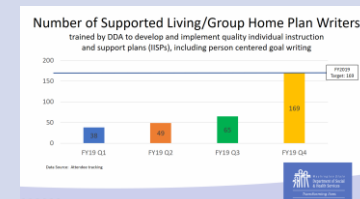
Key Performance Indicators

- Evidence that providers are receiving the necessary training to develop and implement plans necessary to support individuals with challenging support issues

Performance Charts



- [DDA Strategic Plan 2019-2021: Success Measure 4.1.4](#)



- [IISP Training Chart](#)

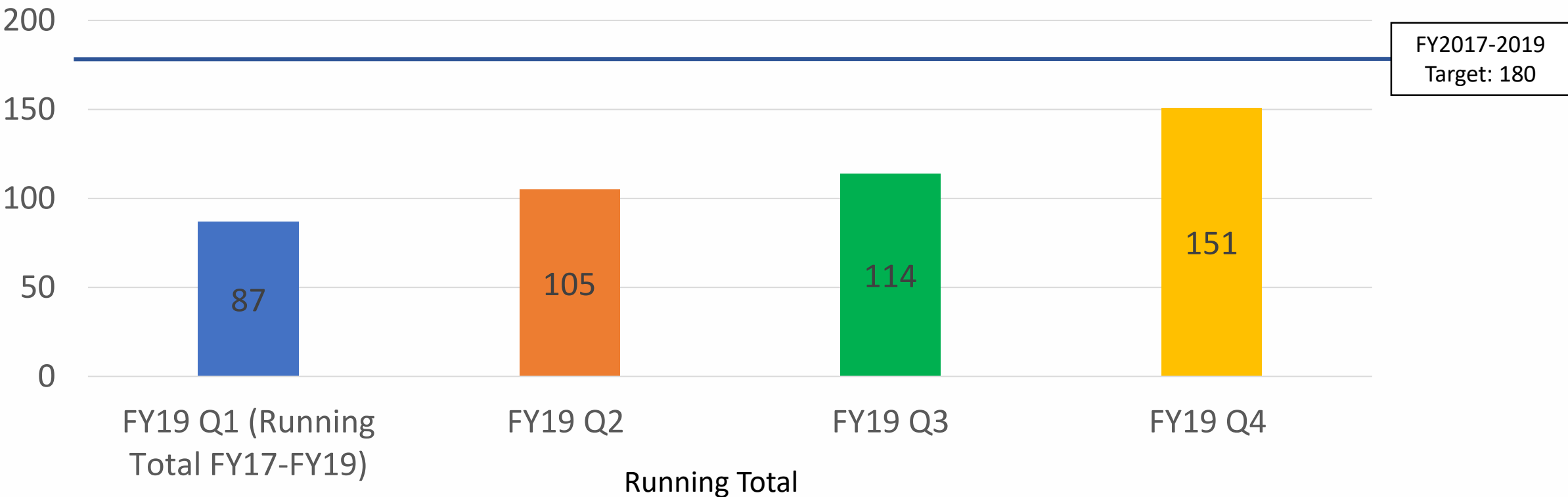


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Functional Assessment and Positive Behavior Support

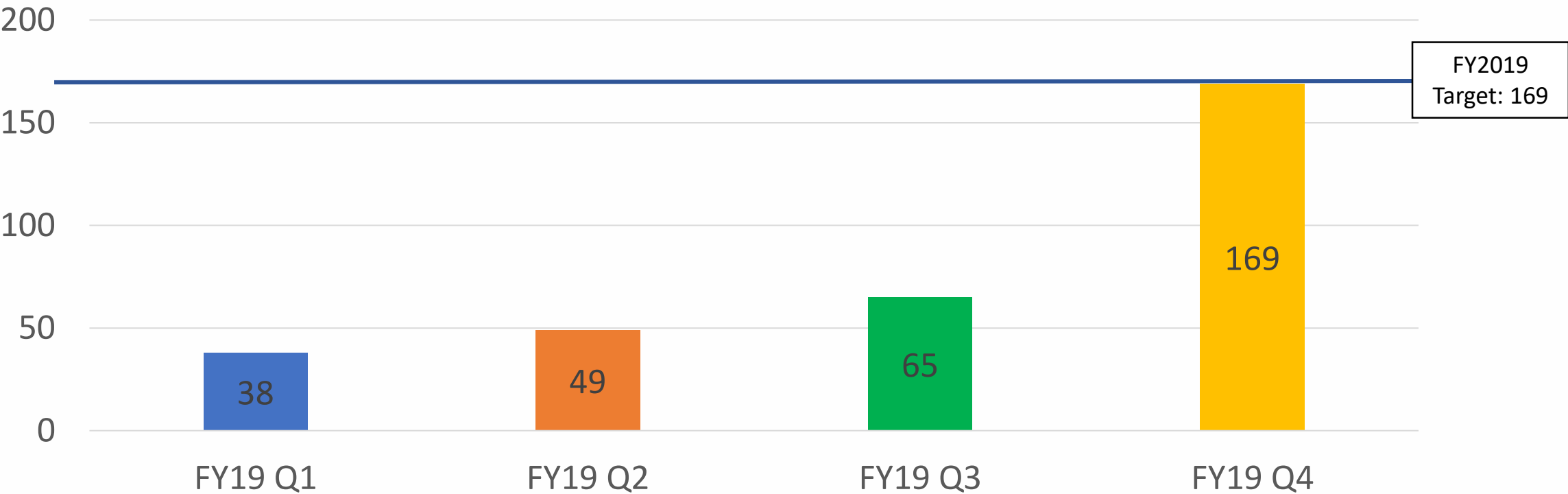
number trained by DDA to develop and implement quality plans



Data Source: Residential QA database from 7/1/2018-6/30/2019

Number of Supported Living/Group Home Plan Writers

trained by DDA to develop and implement quality individual instruction and support plans (IISPs), including person-centered goal writing



Data Source: Attendee tracking

Running Total

Objectives

Health and Safety

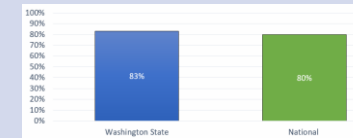
Ensure clients, families and providers are aware of how to report suspected abuse or neglect

Ensure timely and appropriate responses from DDA case management and service providers happens when incidents involving suspected abuse or neglect do occur

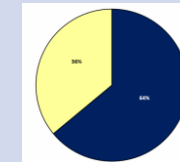
Key performance Indicators

- Families and guardians know how to report abuse and neglect
- Case managers follow up with clients/legal reps at 30 days following allegations of abuse/neglect to ensure satisfaction with actions taken
- Enhanced Case Management Program case manager consistently making in-home visits at least every 4 months

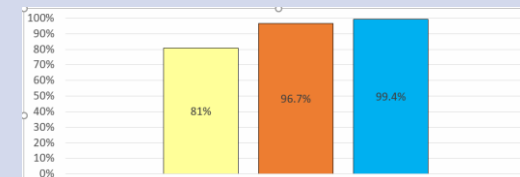
Link to Performance Charts



- [NCI chart for Family/Guardian abuse/neglect](#)



- [QCC measure for DDA Policy 12.01 compliance with 30 day follow up requirement](#)



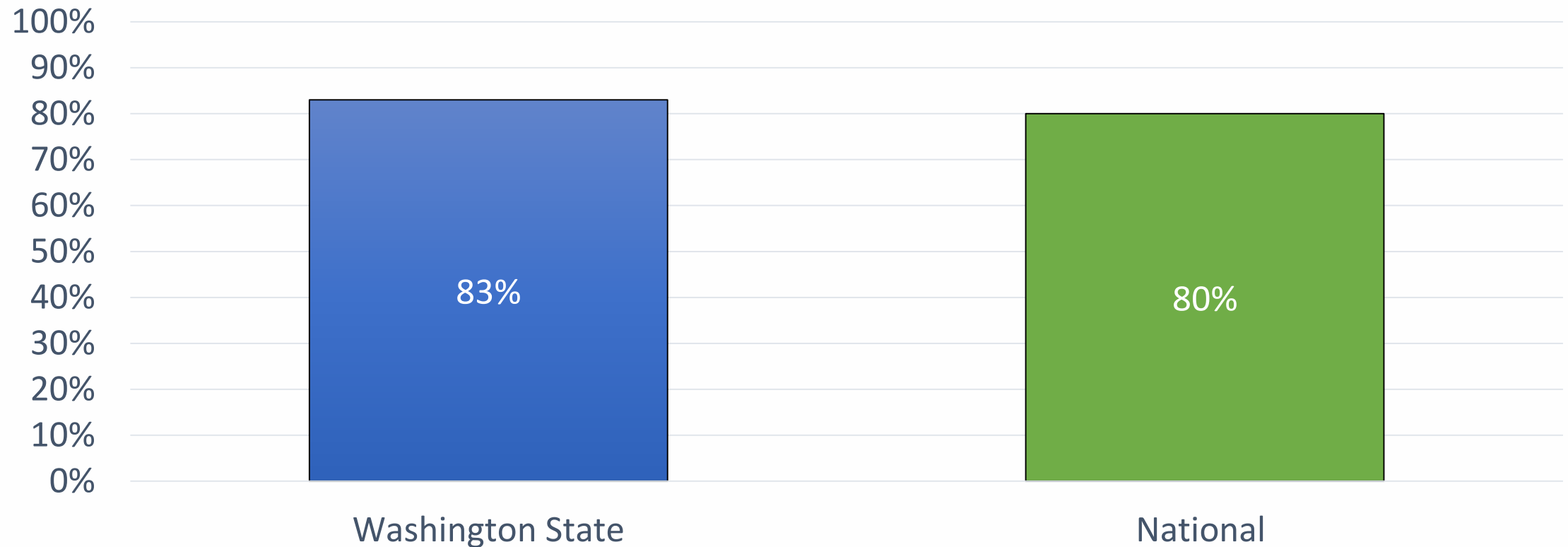
- [ECMP DDA Strategic Plan 2019-2021: Success Measure 2.2.1](#)



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Percentage of Families Indicating they Know How to Report Abuse or Neglect



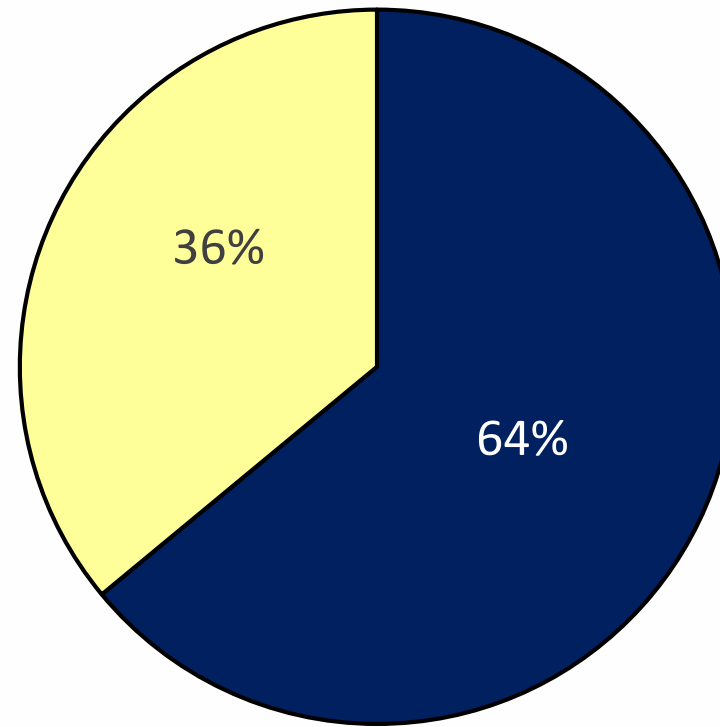
Data source: 2017-2018 NCI Family Guardian Survey



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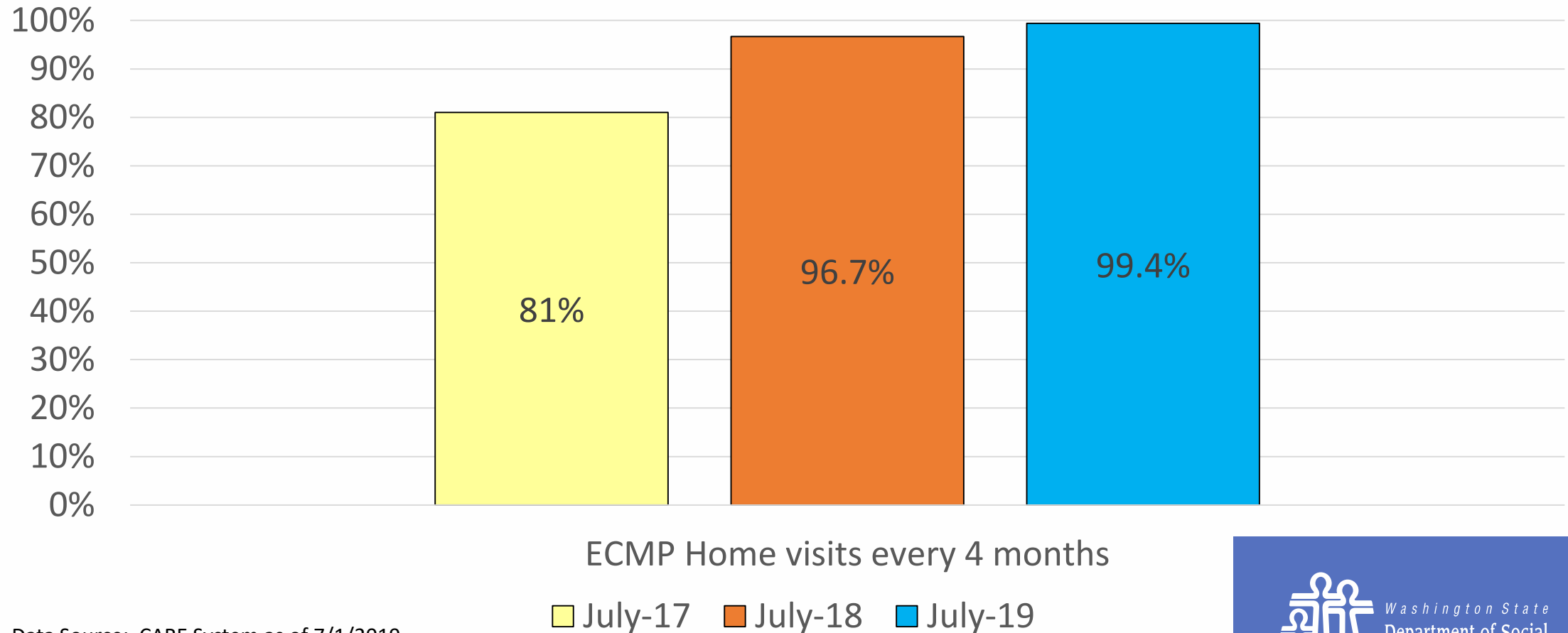
Evidence of Case Manager Contact with Client/Legal Representative within 30 days of the Incident Report date



Data Source: QCC HCBS Monitoring data, Incident Reporting System

■ Yes ■ No

Home Visits to Clients Supported through the Enhanced Case Management Program (ECMP)



Data Source: CARE System as of 7/1/2019

For more information about
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please contact:

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Transforming lives by
providing support
and fostering
partnerships that
empower people to
live the lives they
want

